

“SPACE MEDICINE”

Shuttle – Space Station Crew Health and Safety Challenges for Exploration

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Medical Operations

Johnson Space Center

Houston

The first word from the Moon







SPACE AND LIFE SCIENCES DIRECTORATE

Space Medicine & Health Care Systems Office

Medical Operations Objective

To ensure the health, safety, and well being of the astronaut corps and ground support team during all phases of space flight.



















Mission Support

On-orbit Flight Control Room (FCR) Staffing



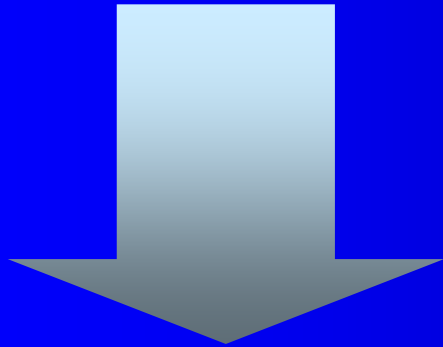
Surgeon Console - FCR

Physiological Issues

- Space Motion Sickness (SMS)
- Cardiovascular
- Neurovestibular
- Musculoskeletal
- Behavioral/Psycho-social

Human Response to Spaceflight

Astronauts experience
a spectrum of
adaptations in flight
and postflight



Balance disorders
Cardiovascular deconditioning
Decreased immune function
Muscle atrophy
Bone loss



- Neurovestibular
- Cardiovascular
- Bone
- Muscle
- Immunology
- Nutrition
- Behavior

Space Motion Sickness (SMS)

- **Incidence**
 - Affects approximately 70% of crewmembers
 - 10% of cases severe
- **Symptoms** – From loss of appetite to nausea and vomiting
- **Time course** – Onset from MECO to 24 hours; peak symptoms 24 to 48 hours; symptoms resolve by 72 to 96 hours
- **Causes**
 - Neurovestibular - otolith mismatch, sensory conflicts
 - Fluid shift
- **Treatment**
 - Decreased activity
 - 1-G orientation
 - Medication (Phenergan IM)

Cardiovascular

Changes in redistribution of body fluids cause inability of the body to adapt to rapid circulatory changes, producing orthostatic symptoms postflight

- **Symptoms** – Dizziness, lightheadedness,
- **Time course** – From reentry to several hours postlanding
- **Causes**
 - Fluid shifts
 - Baroreceptor
- **Treatment**
 - Fluid loading
 - On-orbit exercise benefit
 - Liquid cooling garment
 - Medications





Behavioral/Psycho-Social

Changes in crew mood, morale, and circadian rhythm

- **Incidence** – Affects all crewmembers to some degree
- **Symptoms** – Fatigue and irritability, performance
- **Time course** – Depends on flight plan
- **Causes**
 - Work load
 - Sleep habits and facilities
 - Crew personalities, “crew space”, and cultural differences
 - Temperature
 - Noise
 - Odors
 - Atmosphere
 - Diet
 - Lack of family contact
- **Treatment** – Treat causes



Оранжерея "СВЕТ"

Space Flight Environmental Issues

- Radiation
- Toxic products and propellants
- Habitability
- Atmosphere
- Medical events

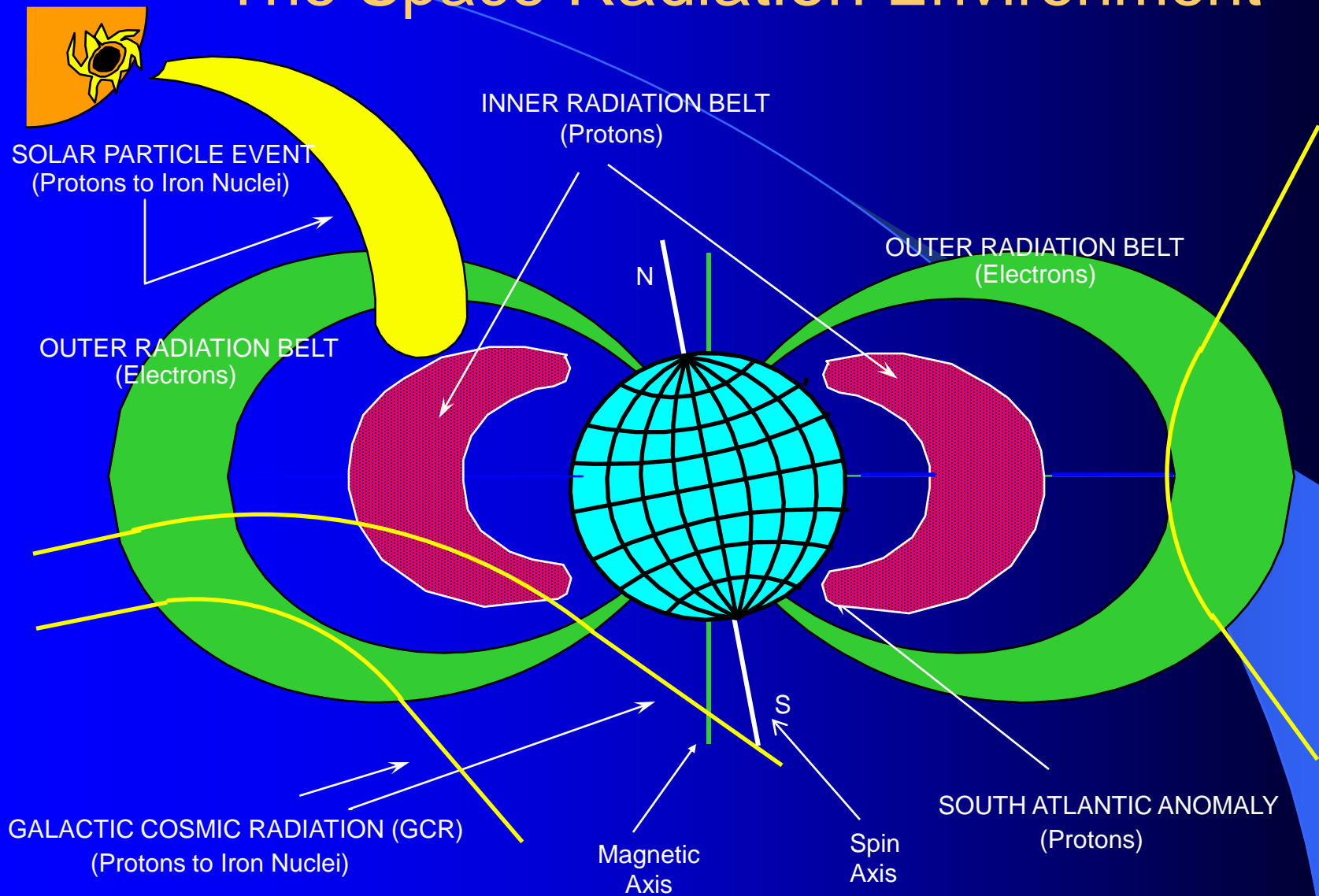
Medical events in U.S. Space Program

- Apollo 8 crew – 1st Americans to report space motion sickness
- Apollo 9 - space motion sickness caused EVA to be rescheduled (1st timeline change due to medical cause)
- Apollo 11 – Type 1 DCS in command module pilot
- Apollo 13 – Kidney infection during mission
- Apollo 15 – Cardiac dysrhythmia (PVC, PAC, bigeminy) during lunar EVA
- Apollo Soyuz Test Project – Nitrogen Tetroxide chemical pneumonitis on reentry

Medical Events in Russian Space Program

- Events not resulting in mission termination or early return
 - Spacecraft fires - 1971, 1977, 1988, 1997
 - Kidney Stone - 1982
 - Hypothermia during EVA - 1985
 - Psychological stress reaction - 1988
 - Spacecraft depressurization - 1997
 - Toxic atmosphere - 1997

The Space Radiation Environment



Representation of the major sources of ionizing radiation of importance to manned missions in low-Earth orbit. Note the spatial distribution of the trapped radiation belts.



Systems & Crew Training



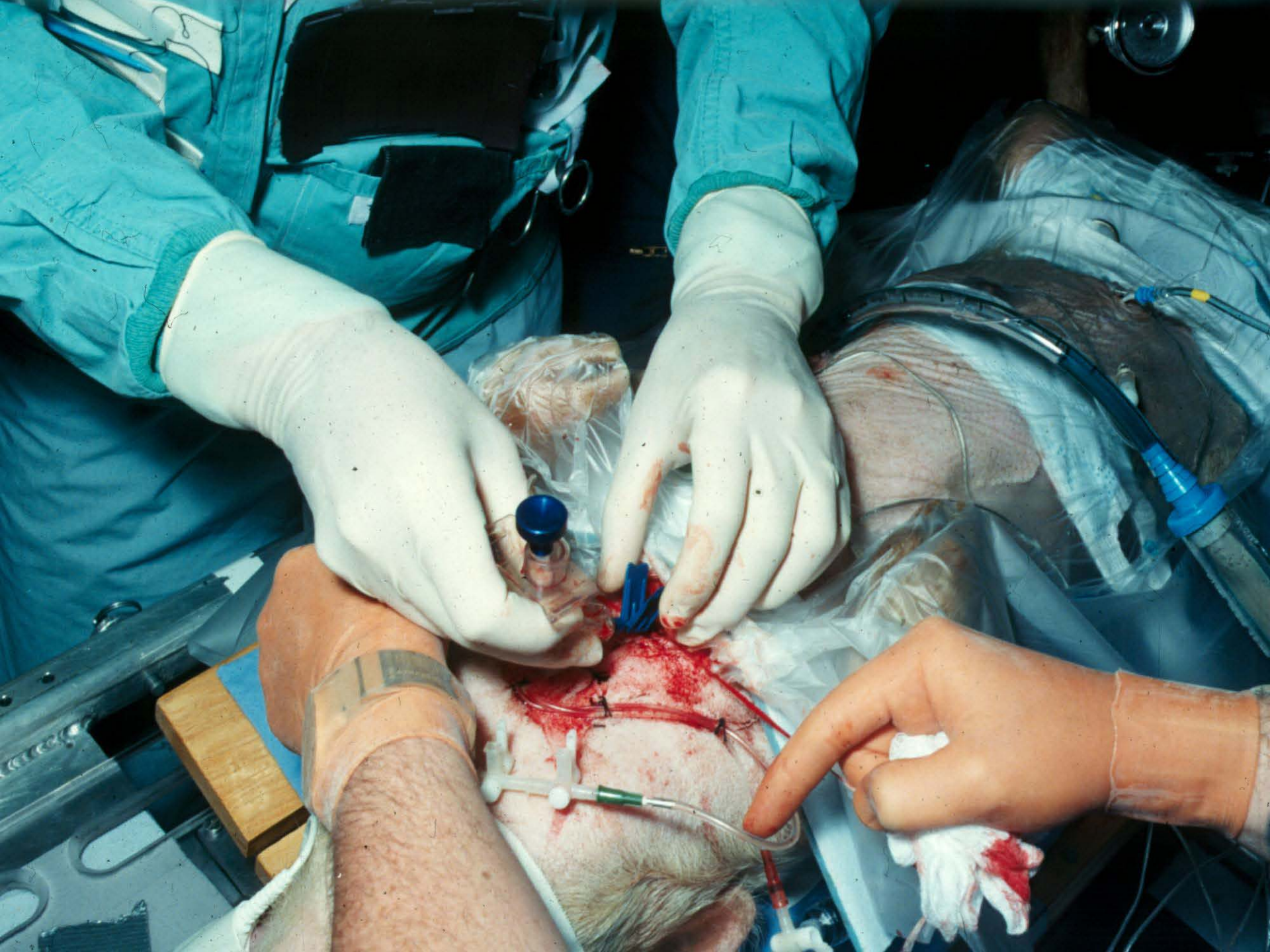
KC-135 “Weightless Wonder, Vomit Comet”



Hardware Testing and Procedure Validation

Developing ACLS algorithms for on-orbit use and training











Systems & Crew Training

Shuttle Orbiter Medical System (SOMS)



ENT SUBPACK
SKD42104024-312

ENT SUBPACK
SKD42104024-312

TRAUMA SUBPACK
SKD42104324-315

AIRWAY SUBPACK
SKD42103824-310

ADMINISTRATION
SUBPACK
SKD42104124-313

SALINE SUPPLY BAG
SKD42104224-314
SN: 1001



DRUG SUBPACK

Systems & Crew Training

Health Maintenance System (HMS)

Defibrillator & Respiratory Support Pack (RSP)

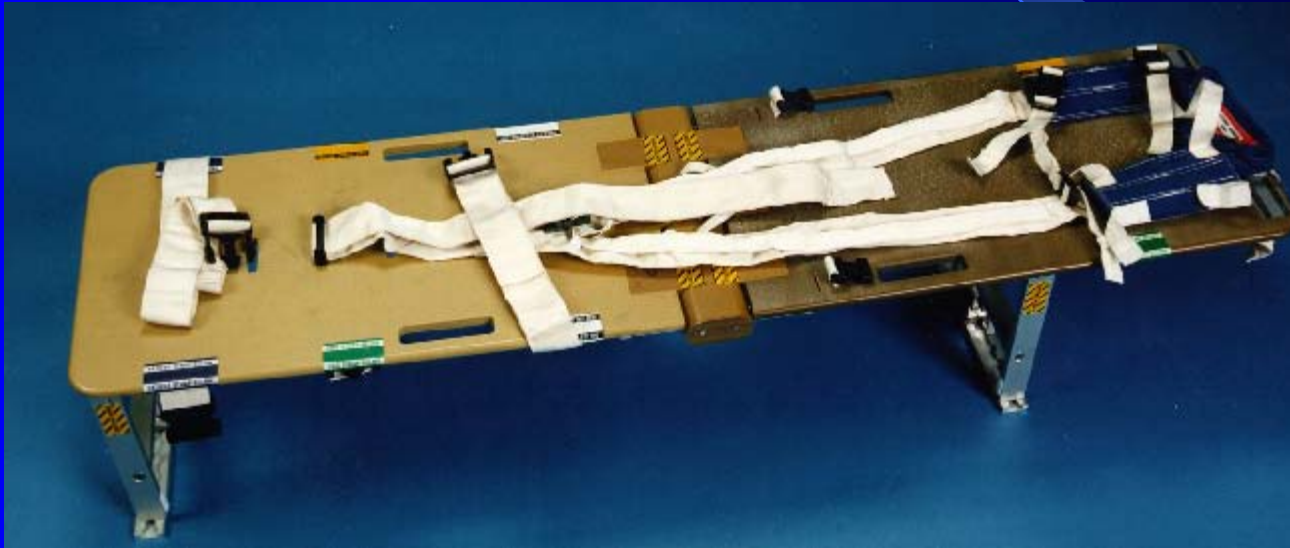


Defibrillator

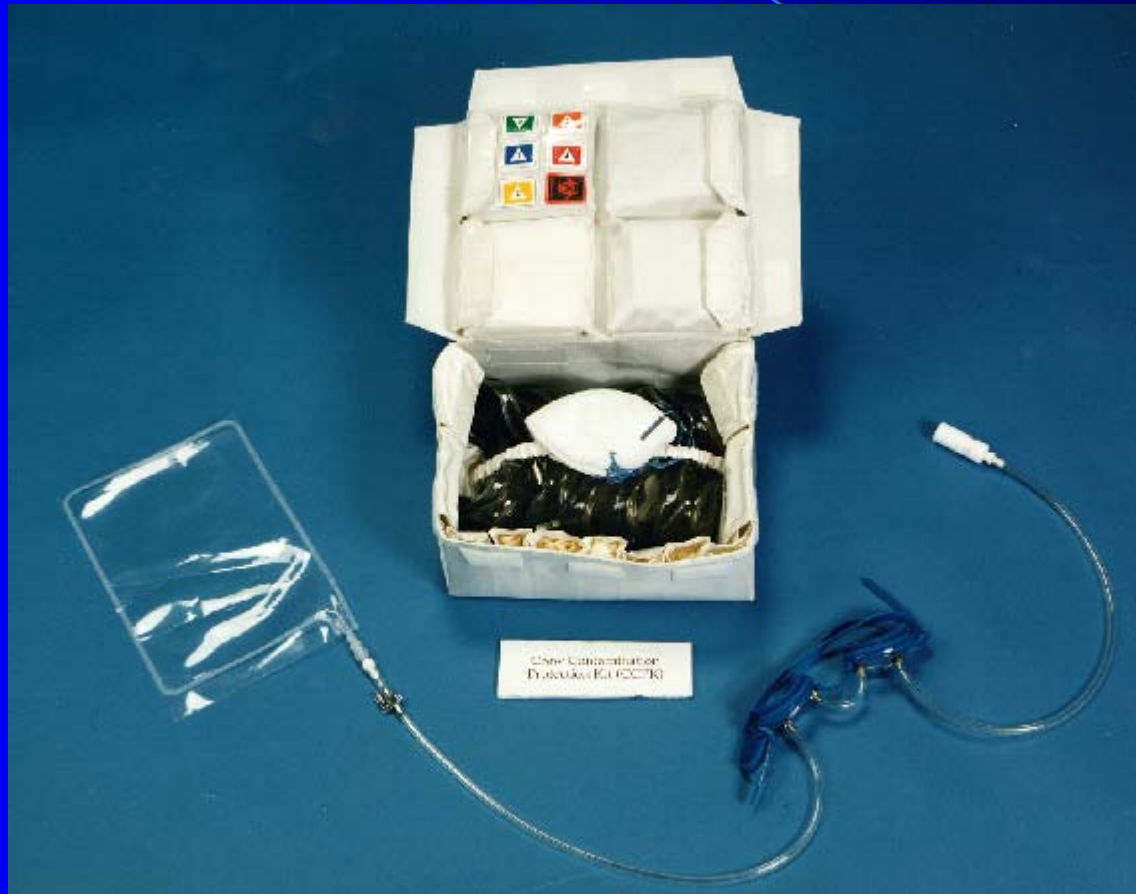


RSP

Crew Medical Restraint System (CMRS)



Crew Contamination Protection Kit (CCPK)







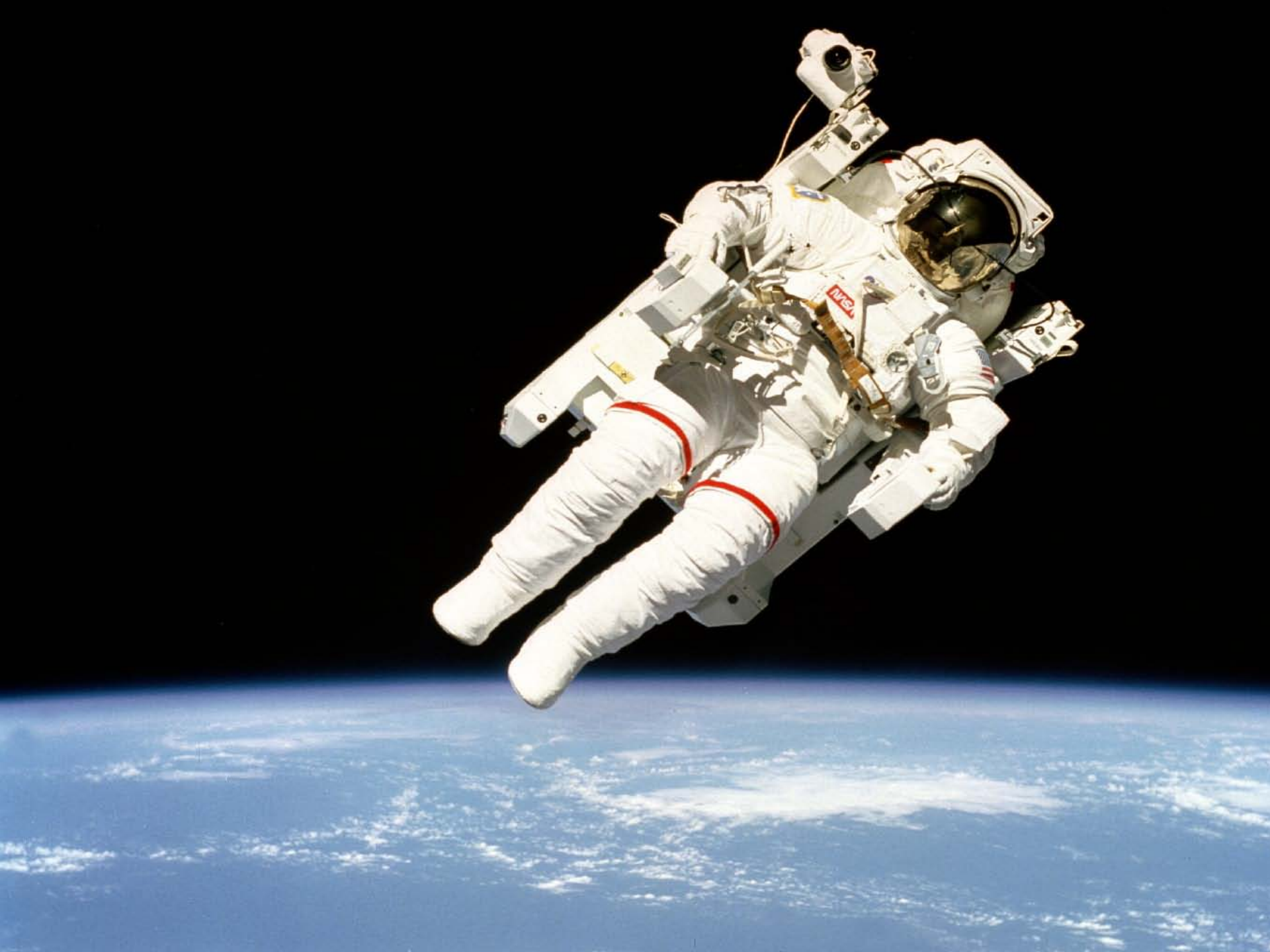




Discovery

CUT HERE
FOR
EMERGENCY
RESCUE

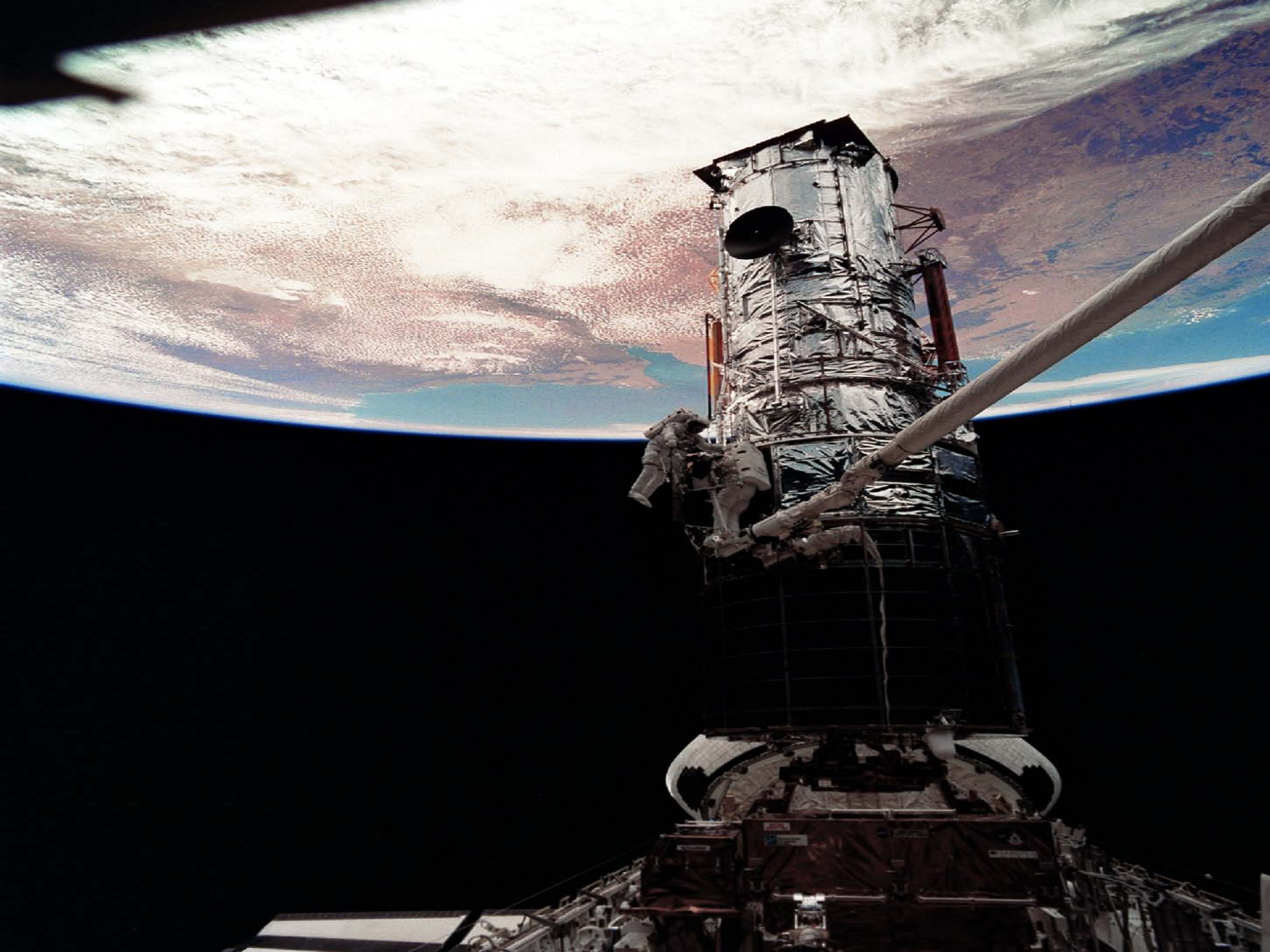
RESCUE
ARROW



Mission Support

- Extravehicular Activity (EVA) Monitoring

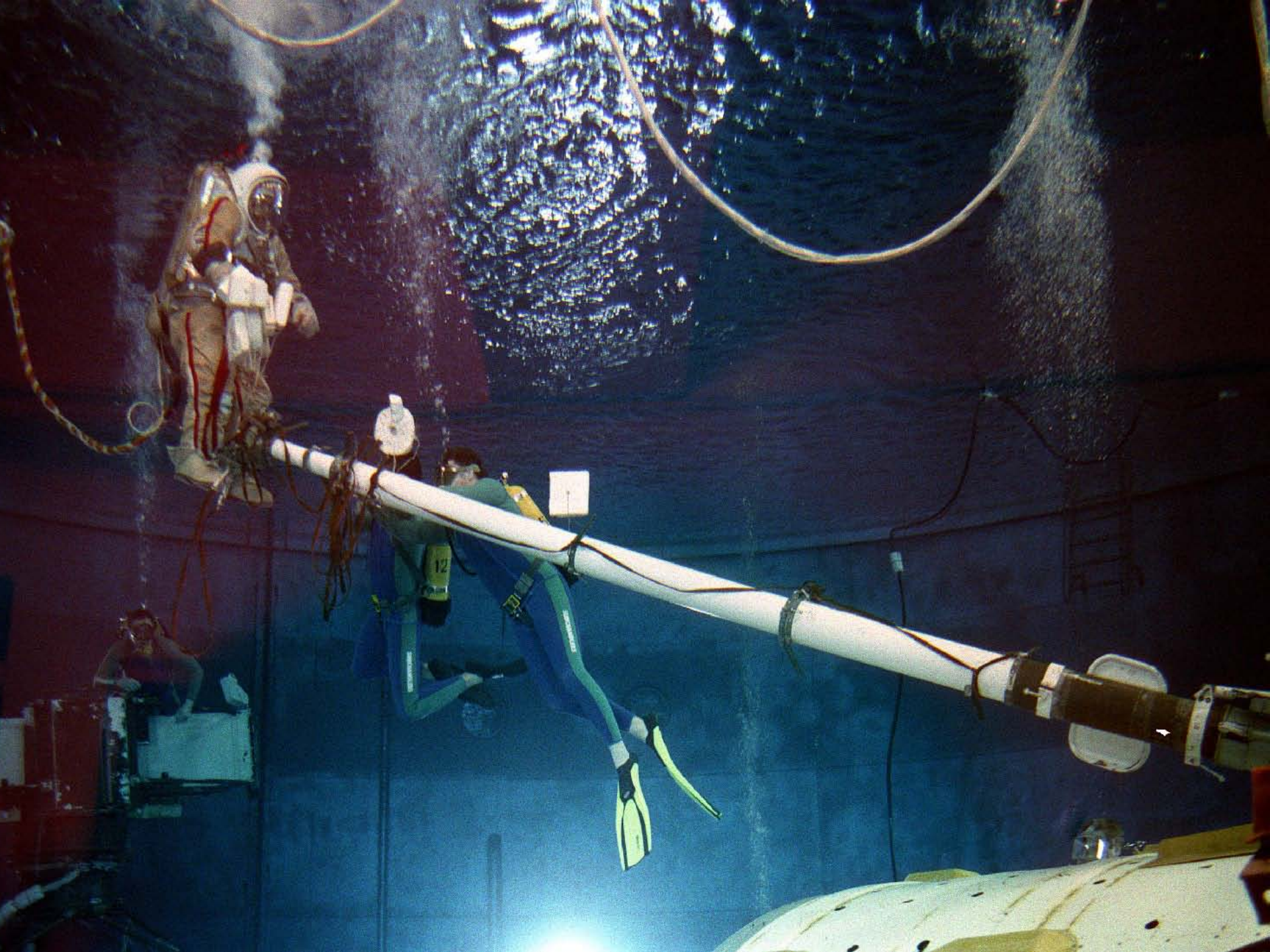












PRP EXERCISE STRATEGIES



**Upright dual arm
and leg cycle
exercise
(ALE)**



**Semi-recumbent intermittent
light exercise simulating
astronaut tasks
(ILE)**





MF57E

MF71E














000
000
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MS-2

TOP

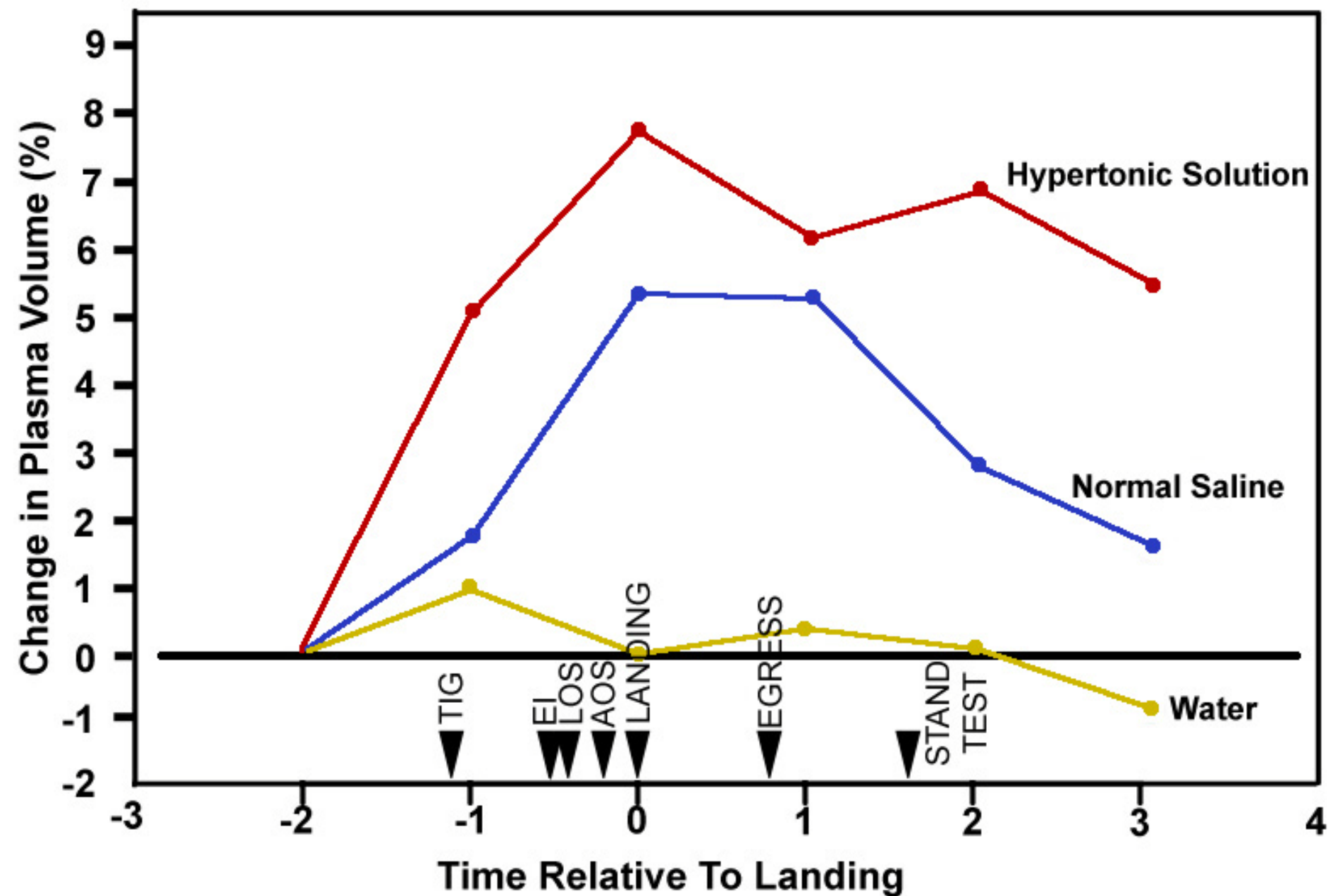
MF57K

IFM Breathing Box
Power Distribution
Battery Pack



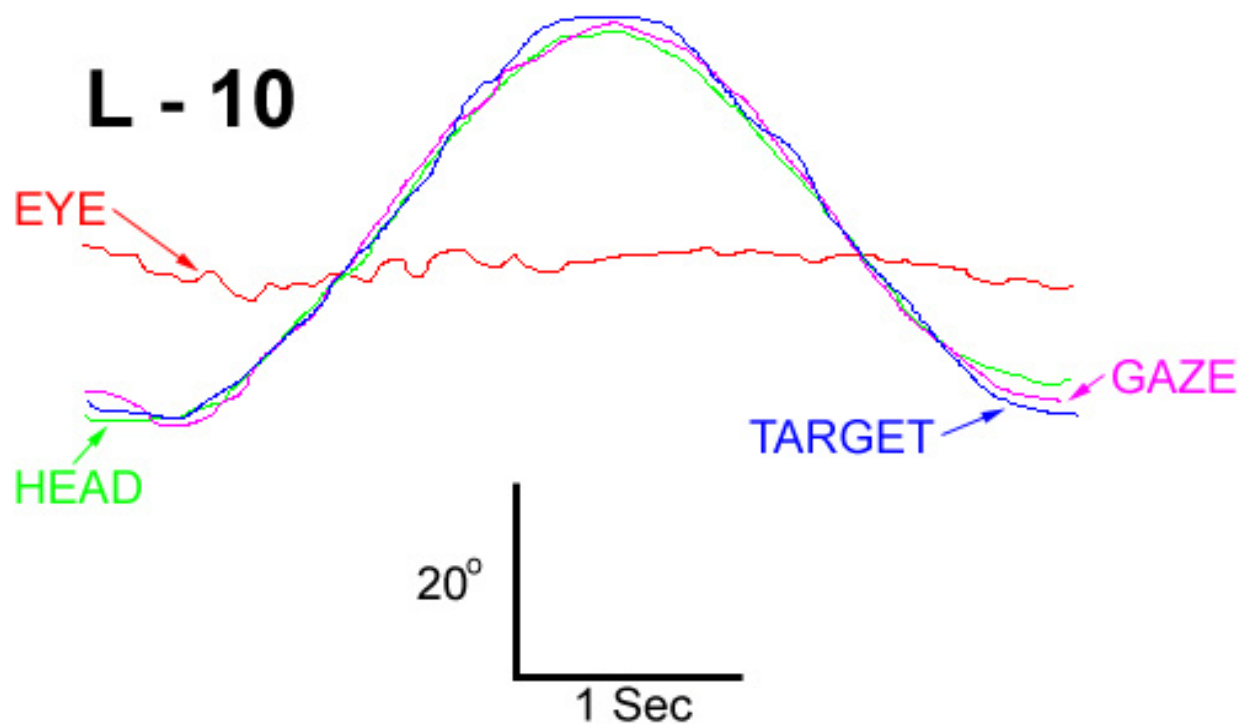
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CST	0	0	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23								
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STS FLUID LOADING COUNTERMEASURES

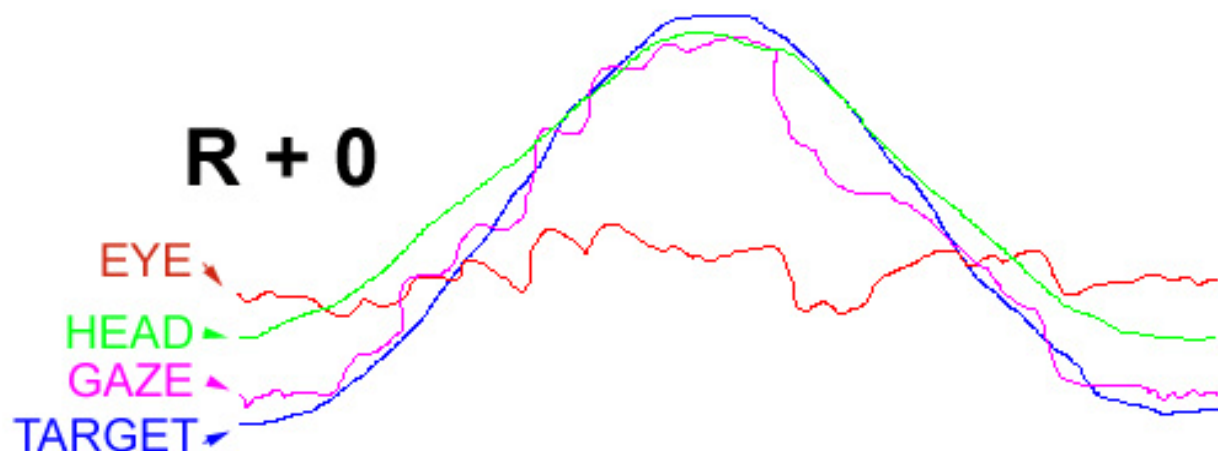


Vertical Pursuit Tracking With Head and Eye

L - 10



R + 0



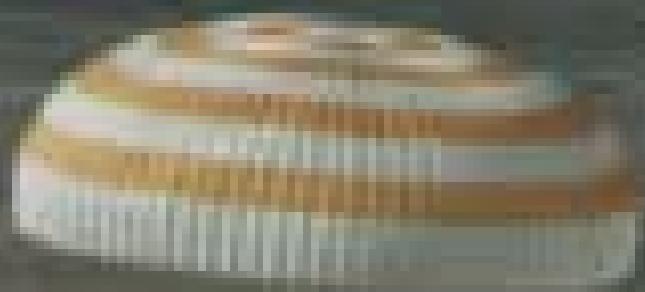






















Astronaut Health

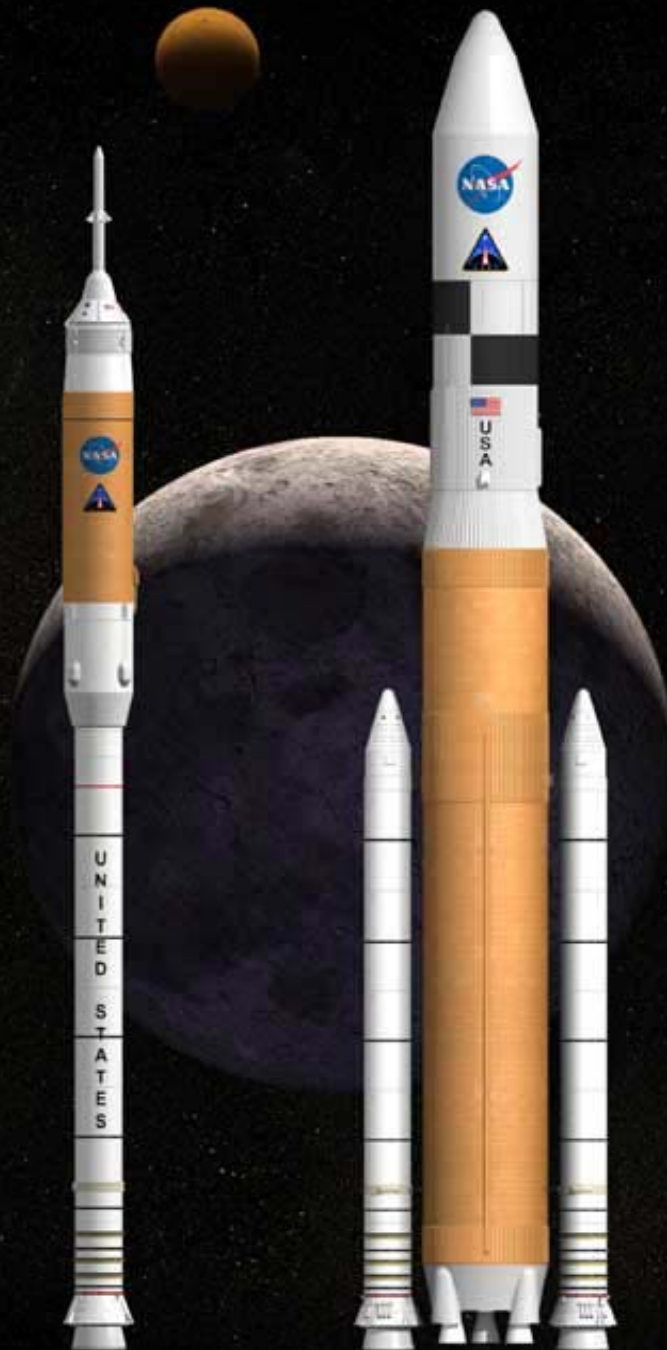


- Physical training and rehabilitation





















Perspective

Earth



Venus



Mars



Mercury



Pluto



Jupiter

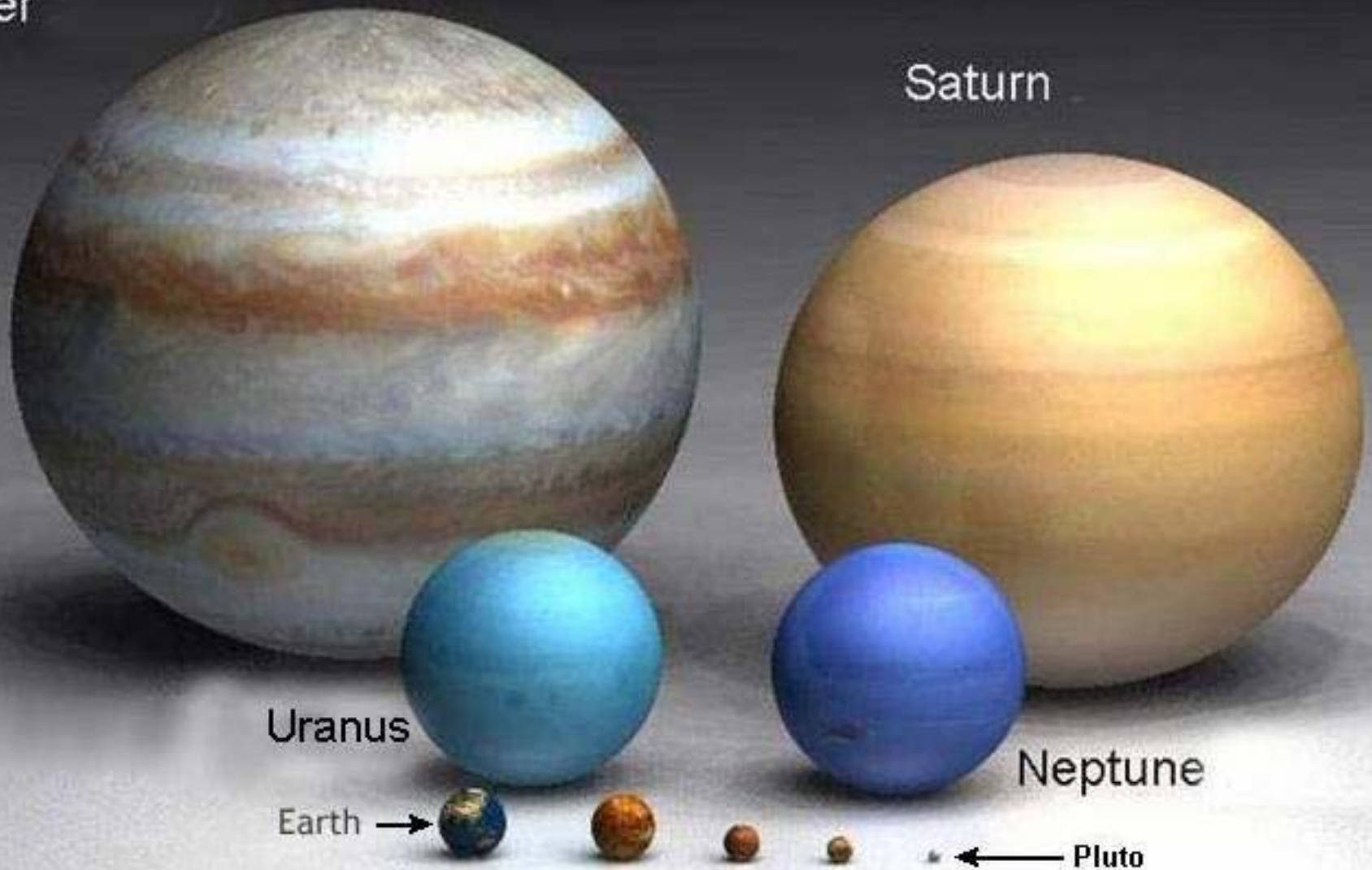
Saturn

Uranus

Neptune

Earth

Pluto



Sun

Jupiter

Earth

Pluto





Sun



Sirius



Pollux



Arcturus

Jupiter is about 1 pixel in size

Earth is invisible at this scale

Betelgeuse

Antares

Sun (1 pixel)
Jupiter is invisible at this scale
Sirius Pollux Arcturus



Rigel



Aldebaran



YOU ARE HERE



Morbidity Associated With Shift Workers¹⁻⁴

- Gastrointestinal disorders (eg, peptic ulcer disease)
- Hypertension/cardiovascular disease
- Psychological distress
- Work-related strain
- Drug/alcohol dependency
- Disruption in social/family life

1. Shields M. *Health Rep.* 2002;13:11-33.

2. *ICSD. Revised.* Rochester, Minn: ASDA; 1997.

3. Boggild H, et al. *Scand J Work Environ Health.* 1999;25:85-99.

4. *Shiftwork Practices 2004.* Circadian Technologies, Inc.; 2003.

Medical Care
in

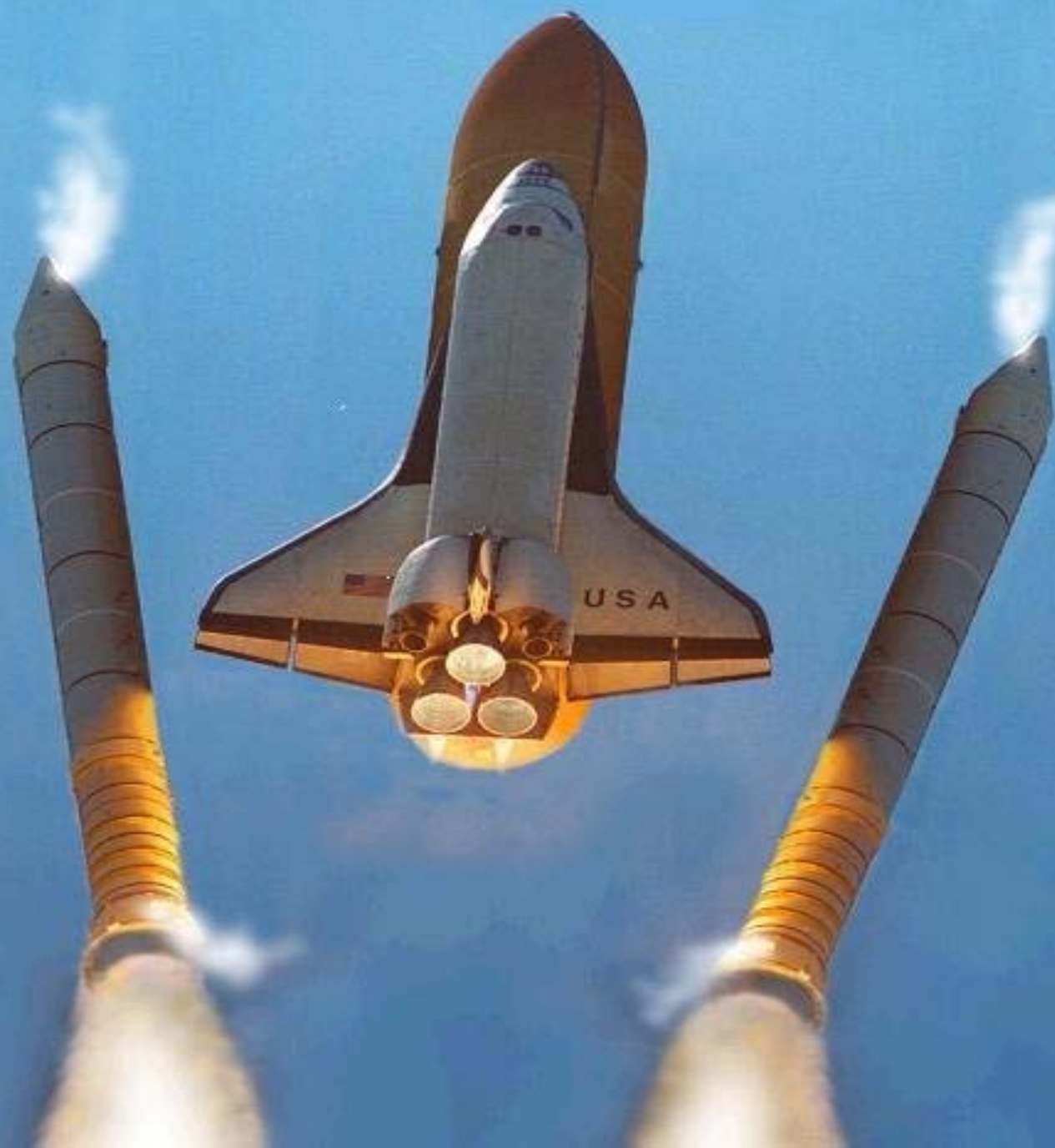


High Performance Environments

HOUSTON

FIRST WORD FROM THE MOON











Medical Care
in



High Performance Environments



Really High Performance Environments



Neurovestibular

In-flight changes in neural feedback function that produce postural imbalance and loss of coordination postflight

- **Incidence** – All crewmembers are affected to some degree
- **Symptoms** – From vertigo and unstable gait to nausea and vomiting
- **Time course** – From landing to 48 - 72 hours postlanding
- **Causes** – Neurovestibular-otolith and proprioception readaptation
- **Treatment**
 - Avoid rapid head movements
 - Slow but progressive increase in activity
 - Medication (Phenergan, Antivert)

